

JAN 30 2004

PATENT & TRADEMARK

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Linda B. Puckett
Linda B. Puckett

PATENT

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Technology Center 2600

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Chris Barnes, et al.
Application No.: 09/973,622
Filed: October 9, 2001
Title: **Visual Funeral Planning System**
Art Unit: 2672
Examiner: Jeffery A. Brier
Atty Docket No.: HILB-702

Cincinnati, Ohio 45202

January 28, 2004

Mail Stop Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

1. Transmitted herewith is an amendment for this application.
2. ☐ Small Entity status of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.
☐ Enclosed is a verified statement to establish small entity status.
☒ Other Than a Small Entity.
3. The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)	SMALL ENTITY		LARGE ENTITY	
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Addit. Fee	Rate	Addit. Fee
TOTAL	52	MINUS	51	1	x 9	\$0	x18	\$ 18
INDEP.	9	MINUS	8	1	x43	\$0	x86	\$ 86
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+145	\$0	+290	\$ -0-
					TOTAL FEE	\$0	TOTAL FEE	\$ 104

___ No additional fee for claims is required.

4. Attached is a check in the sum of \$ 104.

___ Please charge my Deposit Account No. 23-3000 in the amount of \$ ___. A duplicate copy of this sheet is attached.

5. The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply.

Complete (a) or (b) as applicable.

(a) ___ Applicant petitions for an extension of time under 37 CFR 1.136 for the total number of months checked below:

Extension (months)	Fee for other than small entity	Fee for small entity
___ one month	\$ 110.00	\$ 55.00
___ two months	\$ 410.00	\$ 205.00
___ three months	\$ 930.00	\$ 465.00
___ four months	\$1,450.00	\$ 725.00
___ five months	\$1,970.00	\$ 985.00

If an additional extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)

____ An extension for ____ months has already been secured and the fee paid therefor of ____ is deducted from the total fee due for the total months of extension now requested.

____ Extension fee due with this request \$ ____.


____ A check in the amount of \$ ____ is enclosed.

____ Please charge my Deposit Account No. 23-3000 in the amount of \$ ____ . A duplicate copy of this sheet is attached.

OR

(b) X Applicant believes that no extension of time is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

6. If any additional fee is required, please charge Deposit Acct. No. 23-3000.


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